

VII. INDIVIDUALIZED FAMILY SERVICE PLANS

A. General

1. POLICIES

- a. The State Lead Agency (DMHMRSAS) ensures that state and local *policies and procedures* regarding *individualized family service plans* meet requirements of federal regulations. (34 CFR 303.340(2))
- b. "Individualized family service plan" and "IFSP" *mean a written plan for providing early intervention supports and services to eligible children/families that:*
- (1) *Is developed jointly by the family and appropriate qualified personnel providing early intervention supports and services;*
 - (2) *Is based on the multidisciplinary evaluation and assessment of the child and the assessment of the resources, priorities and concerns of the child's family as determined by the family; and*
 - (3) *Includes results or outcomes and supports and services necessary to enhance the development of the child and the capacity of the family to meet the special needs of the child.*
- c. "*Early intervention services*" *mean developmental supports and services that:*
- (1) *Are designed to meet the developmental needs of an infant or toddler with a disability and the needs of the family related to enhancing the child's development, as identified by the individualized family service plan team, in any one or more of the following areas:*
 - (a) *Physical development;*
 - (b) *Cognitive development;*
 - (c) *Communication development;*
 - (d) *Social or emotional development;*
 - (e) *Adaptive development.*

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(34 CFR 303.12(a)(1))

- (2) *Are selected in collaboration with the parents;*

(34 CFR 303.12(a)(2))

- (3) *Include*
- (a) *Assistive technology devices and assistive technology services;*
 - (b) *Family training, counseling and home visits;*
 - (c) *Health services necessary to enable the infant or toddler to benefit from the other early intervention services;*
 - (d) *Medical services only for diagnostic or evaluation purposes;*
 - (e) *Nursing services;*
 - (f) *Nutrition services;*
 - (g) *Occupational therapy;*
 - (h) *Physical therapy;*
 - (i) *Psychological services;*
 - (j) *Service coordination services;*
 - (k) *Social work services;*
 - (l) *Special instruction;*
 - (m) *Speech-language pathology and audiology services, and sign language and cued language services;*
 - (n) *Vision services; and*
 - (o) *Transportation and related costs that are necessary to enable an infant or toddler and the infant's or toddler's family to receive another service listed*

above.

20 USC 1432(4)(E)

- (4) Are provided:
 - (a) Under public supervision:
(34 CFR 303.12(a)(3)(i))
 - (b) By "qualified" personnel, as defined in 34 CFR 303.21:
(34 CFR 303.12(a)(3)(ii))
 - (c) To the maximum extent appropriate, in natural environments, including home and community settings in which children without disabilities participate:
(34 CFR 303.12(b))
 - (d) In conformity with an individualized family service plan; and
(34 CFR 303.12(a)(3)(iii))
 - (e) At no cost, unless, subject to Reg. 303.520(b)(3), Federal or State law provides a system of payments by families, including a schedule of sliding fees.
(34 CFR 303.12(a)(3)(iv))
- (5) Meet the standards of Virginia, including the requirements of Part C.
(34 CFR 303.12(a)(4))

d. The State Lead Agency ensures that:

- (1) Part C early intervention supports and services are provided only by local participating agencies/providers.
- (2) Each agency or person who has a direct role in the provision of early intervention supports and services is responsible for making a good faith effort to assist each eligible child in achieving the results or outcomes in the child's IFSP. However, Part C of the Act does not require that any agency or person be held accountable if an eligible child does not achieve the growth projected in the child's IFSP. (34 CFR 303.346)
- (3) To the extent appropriate, service providers in each area of early intervention supports and services are responsible for: (34 CFR 303.12(c))
 - (a) Consulting with parents, other service providers, and representatives of appropriate community agencies to ensure the effective provision of supports and services in that area; (34 CFR 303.12(c)(1))
 - (b) Training parents and others regarding the provision of those supports and services; and
(34 CFR 303.12(c)(2))
 - (c) Participating in the multidisciplinary team's assessment of a child and child's family, and in the development of integrated goals and results or outcomes for the individualized family service plan.
(34 CFR 303.12(c)(3))
- (4) An IFSP, including a description of the appropriate transition services is developed by a multidisciplinary team, including the parents, for each eligible child/family from birth through age two. The IFSP is developed and implemented for those families who consent to participate in the Part C system.
(34 CFR 303.340(c))

- e. The State Lead Agency resolves disputes or assigns responsibility if there is a dispute between agencies regarding who has responsibility for developing or implementing an IFSP that cannot be resolved at the local level. (Please see Component XII for policies and procedures related to resolving complaints.)

NOTE: In instances where an eligible child must have both an IFSP and an

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<#>Evaluations and assessments are conducted in accordance with §303.322;¶
(34 CFR 303.340 (b)(2))¶
<#>An IFSP (based on the multidisciplinary evaluation and assessment) is developed and implemented, in accordance with §§303.342 and 303.343, for each eligible child/family from birth through age two. For children eligible for Part B services (as per the Code of Virginia), the appropriate requirements are met; and¶

Deleted: <#>Service coordination services are available to each eligible child/family.¶
<#>The Lead Agency ensures that a current IFSP is in effect and implemented for each eligible child and the child's family.¶

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individualized service plan under another federal program, it may be possible to develop a single consolidated document, provided that it (1) contains all the required information in §303.344, and (2) is developed in accordance with the requirements of this part.(34 CFR 303.340(c))

B. IFSP Development, Review and Evaluation

1. POLICIES

- a. For a child that has been evaluated for the first time and determined to be eligible, the State Lead Agency ensures that a meeting is conducted to develop the initial IFSP within 45 days of the referral. (34 CFR 303.342(2))
- b. The State Lead Agency ensures that a periodic review of the IFSP for a child and family is conducted every six months or more frequently if conditions warrant, or if the family requests such a review. The IFSP review may be carried out by a meeting or by another means that is acceptable to the parents and other participants as long as all members have the opportunity to provide input about all contents of the IFSP. The purpose of the periodic review is to determine:
 - (1) The degree to which progress toward achieving the results or outcomes is being made; and
 - (2) Whether modification or revision of the results or outcomes or supports and services is necessary.

(34 CFR 303.342(b))

- c. The State Lead Agency ensures that an IFSP meeting is conducted on at least an annual basis to evaluate the IFSP for a child and the child's family and to revise its provision(s) as appropriate. The State Lead Agency ensures that the results of any current evaluations conducted under §303.322(c), and other information available from the ongoing assessment of the child/family is used in determining what supports and services are needed and will be provided. (34 CFR 303.342(c))

Note: Because the annual IFSP meeting incorporates a periodic review, it is necessary to have only one separate periodic review each year (i.e., six months after the initial and subsequent annual IFSP meetings), unless conditions warrant otherwise. Because the needs of infants and toddlers change so rapidly during the course of a year, certain evaluation procedures may need to be repeated before conducting the periodic reviews and annual evaluation meetings. (34 CFR 303.342 Note)

- d. The State Lead Agency ensures that IFSP meetings:
 - (1) Are conducted in settings and at times convenient to families;
 - (2) Are conducted in the native language of the family or other mode of communication, used by the family, unless clearly not feasible to do so; and
 - (3) Are arranged and written notice is provided to the family and other participants early enough before the meeting to ensure that they are able to attend.

(34 CFR 303.342(d))

- e. The State Lead Agency ensures that the contents of the IFSP shall be fully explained to the parent(s) and informed written consent from the parent(s) is obtained prior to the provision of early intervention supports and services described in the plan. If the parent(s) do not provide consent with respect to a particular early intervention support/service or withdraw consent after first providing it, the State Lead Agency ensures that only the early intervention supports and services to which parental consent is obtained are provided. (34 CFR 303.342(e))

- f. The State Lead Agency ensures that parents retain the ultimate decision in determining

Deleted: <#>The Lead Agency ensures that the IFSP is translated into the native language of the family, unless clearly not feasible to do so.¶

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whether they, their child or other family members will accept or decline supports and services under this part.

(34 CFR 303.344, Note 2)

2. PROCEDURES

a. The service coordinator is responsible for:

- (1) Ensuring the family receives a copy and explanation of the Parental Prior Notice form, Confirmation of the Individualized Family Service Plan (IFSP) Schedule form (or Confirmation of Evaluation/Assessment & Individualized Family Service Plan (IFSP) Meeting form), Notice of Child and Family Safeguards in the Infant and Toddler Connection of Virginia Part C Early Intervention System, and Strengthening Partnerships: A Guide to Family Safeguards in the Infant & Toddler Connection of Virginia Part C Early Intervention System prior to all IFSP meetings in accordance with Component X - Procedural Safeguards.
- (2) Arranging IFSP meetings in settings, at times and in languages that facilitate a family's ability to participate.
- (3) Scheduling and
 - (a) Conducting, in person, the initial IFSP meeting within the 45-calendar day timeline;
 - (b) Facilitating the periodic review of the IFSP at least every six months; and
 - (c) Conducting, in person, an annual IFSP meeting at least by the anniversary date of the initial or previous annual IFSP meeting.
- (4) Ensuring that the IFSP team uses both information from the family regarding their priorities and results of the child assessment, including a review of pertinent records less than six (6) months old from the primary care physician and other sources related to the child's current health status, physical development, and medical history, in determining which IFSP services and informal/formal supports and resources are needed.
- (5) Explaining the contents of the IFSP to the parent(s) and obtaining informed written consent from the parent(s) prior to the provision of early intervention supports and services described in the IFSP.
- (6) Providing the family with a copy and explanation of Notice of Child and Family Safeguards in the Infant and Toddler Connection of Virginia Part C Early Intervention System if the family declines any or all recommended early intervention supports and services and obtaining the family's signature on the Declining Early Intervention Services form.
- (7) Retaining a signed copy of the IFSP and for providing a copy to the family. Service providers may choose to have a copy of the IFSP if written permission is granted by the family.
- (8) Ensuring that service providers are providing those supports and services for which the family has given consent.

b. Families and other IFSP team members can request an IFSP review by contacting the service coordinator at any time.

C. Prior Notice; Native Language

1. POLICIES

a. The State Lead Agency ensures that written prior notice is given to the parent(s) of a child eligible under Part C a reasonable time (5 calendar days) before a public agency and/or other participating agency/provider proposes, or refuses, to initiate or change the

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<#>The service coordinator is responsible for scheduling an annual IFSP meeting (at least by the anniversary date of the initial or previous annual IFSP meeting) to evaluate the IFSP, using results of written evaluations and ongoing assessment, and, as appropriate, to revise its provisions. Because the annual IFSP meeting incorporates a periodic review, it is necessary to have only one separate periodic review each year (i.e., six months after the initial and subsequent annual IFSP reviews), unless conditions warrant otherwise.¶

¶
Note: Because the needs of infants and toddlers change so rapidly during the course of a year, certain evaluation procedures may need to be repeated before conducting the periodic reviews and annual evaluation meetings. . (34 CFR 303.342 Note)¶

¶
<#>The service coordinator is responsible for ensuring that the IFSP team uses both information from the family regarding their priorities and preferences and any current evaluations and assessment information in determining which IFSP services and informal/formal supports and resources are needed.¶

<#>The service coordinator is responsible for arranging IFSP meetings in settings that are comfortable and convenient for families and that facilitate a family's ability to participate. Possible setting options include, but are not limited to, a family's home, the home of a neighbor or of a family child care provider, child care centers, churches, family resource centers, and other community buildings where children and their families normally spend time.¶

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identification, evaluation, or placement of the child, or the provision of appropriate early intervention supports and services to the child and the child's family. (34 CFR 303.403(a))

- b. The State Lead Agency ensures that the notice is in sufficient detail to inform the parents about:
 - (1) The action proposed or refused;
 - (2) The reasons for taking the action;
 - (3) All procedural safeguards that are available under Secs. 303.401-303.460 of this part; and
 - (4) The State complaint procedures under Secs. 303.510-303.512, including a description of how to file a complaint and the timelines under those procedures. (34 CFR 303.403(b))
- c. The State Lead Agency ensures that
 - (1) The notice is written in language understandable to the general public;
 - (2) The notice is provided in the native language of the parents, unless it is clearly not feasible to do so;
 - (3) If the native language or other mode of communication of the parent is not a written language, the public agency and/or other participating agency/provider, is responsible for taking steps to ensure that:
 - (a) The notice is translated orally or by other means to the parent in the parent's native language or other mode of communication;
 - (b) The parent understands the notice; and
 - (c) There is written evidence that the requirements of this paragraph have been met.
 - (4) If a parent is deaf or blind, or has no written language, the mode of communication is that normally used by the parent (such as sign language, Braille, or oral communication). (34 CFR 303.403(c)(3))

2. PROCEDURES

- a. The State Lead Agency provides copies of the Notice of Child and Family Safeguards in the Infant and Toddler Connection of Virginia Part C Early Intervention System to the local lead agencies.
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- b. At the point of entry, the service coordinator provides families with a copy and explanation of the Notice of Child and Family Safeguards in the Infant and Toddler Connection of Virginia Part C Early Intervention System, including prior notice.
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- c. The service coordinator is responsible for ensuring that parents receive written prior notice using the Parental Prior Notice form before a local participating agency/provider proposes, or refuses, to initiate or change the identification, evaluation, or placement of the child, or the provision of appropriate early intervention supports and services to the child and the child's family.
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- d. Local lead agencies ensure that if a parent is deaf or blind, or has no written language, the mode of communication for written prior notice must be that which is normally used by the parent (such as sign language, Braille, or oral communication).
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- e. Local lead agencies ensure that prior notices are:
 - (1) Available in written format, and disseminated and explained to families within the timelines established through the official prior notice and consent forms;
 - (2) Written in the family's native language, unless clearly not feasible to do so; and
 - (3) Translated orally (if the family's native language is not a written language), so that the parent(s) understands the notice.
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- f. The service coordinator must document in the child's record that prior notice and native language requirements have been met.
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D. Participants in IFSP Meetings and Periodic Reviews

1. POLICIES

a. The State Lead Agency ensures that the *initial IFSP meeting and each annual meeting to evaluate the IFSP includes the following participants:*

- (1) *The parent or parents of the child;*
- (2) *Other family members as requested by the parent, if feasible to do so;*
- (3) *An advocate or person outside of the family if the parent requests that the person participate;*
- (4) *The service coordinator who has been working with the family since the initial referral of the child or who has been designated by the public agency and/or other participating agency/provider to be responsible for implementation of the IFSP;*
- (5) *A person or persons directly involved in conducting the evaluations and the assessments in §303.322; and*
- (6) *As appropriate, persons who will be providing supports and services to the child or family.*

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(34 CFR 303.343(a)(1))

b. The State Lead Agency ensures that *if a person in D.1.a. (above) who is directly involved in conducting the evaluation/assessment is unable to attend a meeting, arrangements are made for the person's involvement through other means, including:*

- (1) *Participating in a telephone conference call;*
- (2) *Having a knowledgeable authorized representative attend the meeting; or*
- (3) *Making pertinent records available at the meeting.*

(34 CFR 303.343(a)(2))

c. The State Lead Agency ensures that *each periodic review must provide for participation of persons listed in D.1.a.(1 - 4) of this section. If conditions warrant, provisions must be made for the participation of other representatives identified in D.1.a.*

(34 CFR 303.343(b))

2. PROCEDURES

a. The service coordinator is responsible for making arrangements for required participants to participate in the initial and annual IFSP meetings. Besides the service coordinator who has been working with the family, participants must include:

- (1) Parent or parents of the child;
- (2) Other family members as requested by the parent(s), if feasible to do so;
- (3) An advocate or person outside of the family if the parent requests that the person participate;

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(4) A person or persons directly involved in conducting the evaluation and the assessment under §303.322; and

(5) As appropriate, persons who will be providing services to the child/family.

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b. The service coordinator is responsible for making arrangements for required participants to participate in periodic IFSP reviews, including individuals listed in 2.a(1) through 2.a(3) (above), as well as individuals included in 2.a(4) and 2.a(5) as conditions warrant.

c. The service coordinator is responsible for ensuring that the IFSP meetings are scheduled at times convenient for team members with preferences being given to times that are best for the family.

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d. The service coordinator is responsible for ensuring that IFSP team members who are not able to meet at times convenient for the family are given other options for IFSP participation, such as telephone consultations or written information. All members must have the opportunity to provide input about all content areas of the IFSP.

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E. Content of the IFSP

1. POLICIES

a. The State Lead Agency, in accordance with 34 CFR 303.344 and 20 USC 1436(d), ensures that the IFSP is in writing and contains:

- (1) A statement of the child's present levels of *physical development (including fine motor, gross motor, vision, hearing, and health status), cognitive development, communication development, social or emotional development, and adaptive development, based on objective criteria;*
 - (2) *With the concurrence of the family, a statement of the family's resources, priorities, and concerns related to enhancing the development of the child;*
 - (3) A statement of the measurable results or outcomes expected to be achieved for the child and the family, including preliteracy and language skills, as developmentally appropriate for the child, and the criteria, procedures, and timelines used to determine the degree to which progress toward achieving the results or outcomes is being made and whether modifications or revisions of the results or outcomes or supports and services are necessary;
 - (4) A statement of the specific early intervention supports and services, based on peer-reviewed research, to the extent practicable, necessary to meet the unique needs of the child and the family to achieve the results or outcomes identified in (3) above, including the frequency, intensity, and method of delivering services;
 - (a) "frequency" and "intensity" mean:
 1. The number of days or sessions that a service is provided; and
 2. The length of time the service is provided during each session.
 3. Whether the session is provided on an individual or group basis.
- (34 CFR 303.344(d)(2)(i))
- (b) "Method" means how a service is provided. (34 CFR 303.344(d)(2)(ii))

- (5) A statement of the natural environments, as described in Sec. 303.12 (b) and Sec. 303.18, in which early intervention supports and services are provided, and a justification of the extent, if any, to which the supports and services are not provided in a natural environment. The provision of early intervention supports and services for any infant or toddler with a disability occurs in a setting other than the natural environment that is most appropriate, as determined by the parent and the individualized family service plan team, only when early intervention cannot be achieved satisfactorily for the infant or toddler in a natural environment;

(34 CFR 303.344(d)(1)(ii) and 20 USC 1435(a)(16)(B))
- (6) The location of the services;

"Location" means actual place or places where each service will be provided.

(34 CFR 303.344(d)(3))

- (7) The projected dates for initiation of services as soon as possible after the IFSP meeting and the anticipated length and duration of those services;

(34 CFR 303.344(f) and 20 USC 1436(d)(6))

NOTE: The entitled early intervention supports and services listed on the IFSP must begin in a timely manner, within 21 calendar days of the date the parent(s) signs the IFSP. Early intervention supports and services may begin more than 21 calendar days after the parent(s) signs the IFSP if the IFSP team decides on and documents the reasons for a later start date in order to meet the individual needs of the child and family.
- (8) The identification of the service coordinator from the profession most immediately

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NOTE: IFSP outcomes are not the same thing as IEP goals or objectives. Outcomes are statements of the changes that families want to see for their children or themselves as a result of their participation in early intervention and are measurable.¶

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relevant to the child's or family's needs (or who is otherwise qualified to carry out all applicable responsibilities under this part) who is responsible for the implementation of the IFSP and coordination with other agencies and persons, including transition services. In meeting this requirement, the IFSP team, which includes the family, may (a) assign the same service coordinator who was appointed at the time the child was initially referred, or (b) appoint a new service coordinator. As used in this paragraph, the term "profession" includes "service coordination;"

(34 CFR 303.344(g)(1))

- (9) The payment arrangements, if any; and
- (10) The steps to be taken, including timelines, to support the transition of the child to preschool under Part B of the act, to the extent those services are appropriate, or other services that may be available, if appropriate, or to exit the program.

(34 CFR 303.344(h)(1) and 20 USC 1437(a)(9)(A))

b. The State Lead Agency ensures that to the extent appropriate, the IFSP includes:

- (1) Medical and other non-entitled services necessary to the child, but that are not required under Part C; (34 CFR 303.344(e)(1)(i))
- (2) The funding sources to be used in paying for those services, or the steps to be taken to secure services through public or private sources; (34 CFR 303.344(e)(1)(i))

"Other services" does not include routine medical services (e.g., immunizations and "well-baby" care), unless a child needs those services and they are not otherwise available or being provided. (34 CFR 303.344(e)(2))

NOTE: "Other services" are services that a child or family needs, but that are neither required nor covered under Part C. While listing the non-required services in the IFSP does not mean that those services must be provided, their identification can be helpful to both the child's family and the service coordinator for the following reasons. First, the IFSP provides a comprehensive picture of the child's total service needs (including the need for medical and health services, as well as early intervention supports and services). Second, it is appropriate for the service coordinator to assist the family in securing the non-required services (e.g., by (a) determining if there is a public agency that could provide financial assistance, if needed; (b) assisting in the preparation of eligibility claims or insurance claims, if needed; and (c) assisting the family in seeking out and arranging for the child to receive the needed medical-health services).

Thus, to the extent appropriate, it is important for Virginia's procedures under this part to ensure that other needs of the child, and of the family related to enhancing the development of the child, such as medical and health needs, are considered and addressed, including determining (a) who will provide each service, and when, where, and how it will be provided; and (b) how the service will be paid for (e.g., through private insurance, an existing Federal-State funding source such as Medicaid or EPSDT, or some other funding arrangement). (34 CFR 303.344, Note 3)

Note: Although the IFSP includes information about each of the items listed this does not mean the IFSP must be a detailed, lengthy document. It might be a brief outline, with appropriate attachments that address each of the points in the paragraphs under this section. It is important for the IFSP to be clear about (a) what supports and services are to be provided; (b) the actions that are to be taken by the service coordinator in initiating those supports and services, and (c) what actions will be taken by the parent(s). (34 CFR 303.344, Note 4)

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<#>"frequency" and "intensity" mean:¶
<#>The number of days/sessions that a service is provided:¶
<#>The length of time the service is provided during each session:¶
<#>Whether the session is provided on an individual or group basis. ¶
<#>"Location" means actual place or places where each service will be provided.¶
(34 CFR 303.344(d)(3))¶
<#>"Method" means how a service is provided. (34 CFR 303.344(d)(2)(ii))¶

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<#>The Lead Agency ensures that the IFSP:¶
<#>Includes a statement of the projected dates for initiation of services in E.1a.4 above as soon as possible after the IFSP meetings described in §303.342 and the anticipated duration of services. (34 CFR 303.344(f))¶
<#>Includes the name of the service coordinator from the profession most immediately relevant to the child's or family's needs (or who is otherwise qualified to carry out all applicable responsibilities) who is responsible for implementation of the IFSP and coordinating with other agencies and persons (34 CFR 303.344(g)(1) see Virginia policies on service coordination, "H" of this component). In meeting this requirement, the IFSP team, which includes the family, may (a) assign the same service coordinator who was appointed at the time the child was initially referred for evaluation, or (b) appoint a new service coordinator. As used in this paragraph, the term "profession" includes "service coordination".¶
<#>Addresses "transition at age three" including steps to support transition of the child and family at ages two and three to preschool services under IDEA-Part B to the extent appropriate and to other services available if appropriate (see Virginia policy on transition, section "I" of this component). (34 CFR 303.344(h))¶
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2. PROCEDURES

- a. Local lead agencies are responsible for completion of a written IFSP for each eligible child and family using the required statewide IFSP form (available at www.infantva.org).
- b. The statement of the child's developmental status, included in the IFSP, must be based on objective criteria, which are not limited to the assignment of a developmental level in each developmental domain, but also may include functional descriptions of the child's developmental status and the quality of child performance based on a variety of observational assessment methods and procedures.
- c. The service coordinator is responsible for informing the family that inclusion of a family-directed assessment related to enhancing the development of the child is voluntary and refusal to include such a statement in the IFSP in no way jeopardizes the supports and services provided as part of the IFSP.
- d. The IFSP team is responsible for developing functional and measurable results or outcomes. Results or outcomes are identified based on information gathered through the evaluation and assessment process, which includes conversations with the family (with the family's consent) to identify current activities and routines, potential child learning opportunities and areas where the family would like assistance.
- e. The IFSP team (which includes the family as an equal team member) determines the early intervention supports and services necessary to meet the unique needs of the child and family, including the frequency and intensity.
- f. The service coordinator is responsible for supporting the family to be a full and equal partner on the IFSP team.

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<#>The service coordinator is responsible for retaining a signed copy of the IFSP and for providing a copy to the family. Service providers may choose to have a copy of part of the IFSP if necessary and if permission is granted by the family.¶
The service coordinator is responsible for advising the family of the availability of advocacy services and of the dispu... [2]

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F. Provision of Supports and Services Before Evaluation and Assessment are Completed

1. POLICIES

- a. The State Lead Agency ensures that early intervention supports and services for an eligible child/family may commence before the completion of the evaluation and assessment, if the following conditions are met:
 - (1) Parental consent is obtained;
 - (2) An interim IFSP is developed by the IFSP team that includes:
 - (a) The name of the service coordinator who is responsible for implementation of the interim IFSP and coordination with other agencies and persons;
 - (b) The early intervention supports and services that are determined to be needed immediately by the child and the child's family; and
 - (c) Signatures of both the service coordinator and the parent(s).
 - (3) The evaluation and assessment are completed within the [45 day] time period.
 - (4) Documentation exists that there is a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay.
- Note: This section is intended to accomplish two specific purposes:
- (1) To facilitate the provision of services in the event that a child has obvious immediate needs that are identified, even at the time of referral, and
 - (2) To ensure that the requirements for the timely evaluation and assessment are not circumvented.

(34 CFR 303.345)

2. PROCEDURES

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- a. The service coordinator and the family jointly develop the interim IFSP in accordance with F.I.a. The service coordinator and family both sign the interim IFSP to acknowledge their participation in the development of the interim IFSP and the family's consent for supports and services to begin
- b. The service coordinator is responsible for ensuring that evaluation/assessment and development of the initial IFSP occur within 45-calendar days of referral.

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G. Service Coordination

1. POLICIES

- a. Each child/family eligible under this part is provided with one service coordinator who is responsible for:
 - (1) Coordinating all supports and services across agency lines; and
 - (2) Serving as the single point of contact in helping parent(s) to obtain the supports and services and assistance they need. (34 CFR 303.23(a)(2))
- b. Service coordination is a required function that must be carried out at public expense, and for which no fees may be charged to parents. (34 CFR 303.521(b)(3))
- c. "Service Coordination" means the activities carried out by a service coordinator to assist and enable a child eligible under this part and the child's family to receive the rights, procedural safeguards, and supports and services that are authorized to be provided under Virginia's early intervention program. (34 CFR 303.23(a)(1))
- d. Service coordination is an active, ongoing process that involves:
 - (1) Assisting parents of eligible children in gaining access to the early intervention supports and services and other services identified in the individualized family service plan;
 - (2) Coordinating the provision of early intervention supports and services and other services (such as medical services for other than diagnostic and evaluation purposes) that the child needs or is being provided;
 - (3) Facilitating the timely delivery of available supports and services; and
 - (4) Continuously seeking the appropriate supports and services and situations necessary to benefit the development of each child being served for the duration of the child's eligibility. (34 CFR 303.23(a)(3))
- e. Service coordinators have demonstrated knowledge and understanding about:
 - (1) Infants and toddlers who are eligible under this part;
 - (2) Part C of the Act and the regulations in this part;
 - (3) The nature and scope of supports and services available under the early intervention program, the system of payments for supports and services in Virginia, and other pertinent information. (34 CFR 303.23(d))

Deleted: The presence of an interim IFSP does not affect the 45-day time period for the completion of evaluation and assessment and development of the IFSP

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¶
<#>POLICIES¶
<#>In Virginia,¶
<#>"Parent" means a natural or adoptive parent of a child, a guardian, a person acting as parent (such as a grandparent or stepparent with whom the child lives, or a person who is legally responsible for the child's welfare;), or a surrogate parent who has been assigned in accordance with Reg. 303.406. (34 CFR 303.19(a)¶
¶
Unless State law prohibits a foster parent from acting as a parent, a State may allow a foster parent to act as a parent under Part C of the Act if:¶
¶
<#>The natural parents' authority to make the decisions required of parents under the Act has been extinguished under State law; and¶
<#>The foster parent-¶ [5]

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<#>The Lead Agency ensures that service coordination is a required function... [7]

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<#>Assisting parents of eligible ch... [8]

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- f. The service coordinator is responsible for:
 - (1) informing the family of its rights and procedural safeguards; the procedures for evaluation and assessments; the development, review and evaluation of the IFSP; and the delivery of supports and services;
 - (2) Coordinating the performance of evaluations and assessments;
 - (3) Facilitating and participating in the development, review, and evaluation of individualized family service plans;
 - (4) Assisting families and other IFSP team members in identifying available service

- providers;
- (5) Coordinating and monitoring the delivery of available supports and services;
 - (6) Informing families of the availability of advocacy services;
 - (7) Coordinating with medical and health providers; and
 - (8) Facilitating the development of a transition plan to preschool services, if appropriate, or to other appropriate services that may be available, or to exit the program. (34 CFR 303.23(b))
- g. The State Lead Agency ensures that supports and services are coordinated across agencies, that service coordinators are assigned and that policies and procedures related to service coordination are carried out.

2. PROCEDURES

- a. Local lead agencies ensure that:
- (1) A service coordinator is assigned at the time of a child's referral.
 - (2) A service coordinator is designated at the initial IFSP meeting.
 - (3) A process is available that a family can follow to request a change in service coordinators, and families are informed of this process.
- b. The IFSP team, which includes the family:
- (1) Determines the service coordination outcomes and the necessary activities to be provided each child and family, depending on child and family resources, priorities and concerns;
 - (2) Determines the frequency and intensity of service coordination for an individual family and child. The frequency and intensity of service coordination may change as family strengths, needs, resources, and circumstances change.
- NOTE: Some families may prefer to coordinate their own supports and services; it is still a requirement of Part C, however, that they have an official service coordinator assigned.

H. Transition

1. POLICIES

- a. The State Lead Agency ensures that the transition component of each IFSP includes the steps, including timelines, to be taken to support the transition of the child, upon reaching age two (by September 30) or such time before the child reaches three years, to:
- (1) Preschool services under Part B of the Act, to the extent that those services are considered appropriate;
 - (2) Other services that may be available, if appropriate; or (34 CFR 303.344(h))
 - (3) Exit the program (20 USC 1437(a)(9)(A)).
- b. The State Lead Agency ensures that steps in transition plans are developed jointly by the child's family and Part C personnel as well as Part B personnel when required and appropriate and that the steps include:
- (1) Timelines;
 - (2) Discussions with, and training of, parents regarding future placements and other matters related to the child's transition;
 - (3) Transmission, unless the parents disagree, of the child's name, address, telephone number, and birth date to the school division in which the child resides as the child becomes age eligible for Part B;
 - (4) Procedures to prepare the child for changes in service delivery, including steps to help the child adjust to, and function, in the new setting;
 - (5) With parental consent, the transfer of child-specific information to the local educational agency (LEA), or to other local early intervention systems within Virginia or other state early intervention systems, to ensure continuity of supports

Deleted: <#>LICCs develop and implement policies and procedures (including mechanisms) related to service coordination emphasizing:¶
 <#>Promoting family independence and self-sufficiency;¶
 <#>Supporting and accepting decisions made by families by assuming that all families have the capacity to understand, learn, and manage events in their lives;¶
 <#>Mobilizing informal supports to meet families' needs and the needs of their children;¶
 <#>Promoting family-provider partnerships; ¶
 <#>Providing necessary information to families to make informed decisions; and¶
 <#>Assisting in preparing for transition.¶
 <#>LICCs facilitate the development of local interagency agreements that detail an agency's role in the provision of service coordination in accordance with policies and procedures. Each LICC and participating agency is responsible for ensuring that it complies with the agreement. Participating agencies may use informal and formal channels to resolve implementation problems.¶

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 NOTE: The procedures for designating a service coordinator at the time of the initial IFSP meeting do not preclude the temporary service coordinator from continuing as service coordinator.¶
 ¶
 <#>The IFSP team acknowledges the role of the service coordinator. The IFSP team ensures that the family knows who their service coordinator is, and knows the procedures to change their ser(... [9]

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and services, including evaluation and assessment information required in Sec. 303.322, and copies of IFSPs that have been developed and implemented in accordance with Secs. 303.340 through 303.346; and (34 CFR 303.344(h)(2))

- (6) The Part B eligibility process.
- c. The State Lead Agency ensures the continuation of appropriate early intervention supports and services until the third birthday for children who are:
 - (1) Eligible for supports and services under Part C but do not meet eligibility criteria for Part B programs;
 - (2) Eligible for Part B services but whose parents choose to delay transition to a future time before the child reaches age three;
 - (3) Age eligible for Part B services but whose parents do not consent to a referral evaluation or placement under Part B.

NOTE: Children and families may not participate in Part C after the child reaches his/her third birthday.

d. In the case of a child who may be eligible for preschool services under Part B, with the family's approval, a conference is convened among the family, the local Part C system, and the LEA, at least 90 days (and at the discretion of all such parties, up to 9 months) before the child's third birthday, or if earlier, the date on which the child is eligible for the preschool program under Part B of the Act in accordance with State law is convened. In the case of a child who may not be eligible for preschool services under IDEA-Part B, with approval of the family, reasonable efforts are made to convene a conference among the family, the local Part C system and providers of other appropriate services that the child may receive. The purpose of this meeting is to:

- (1) Discuss appropriate services that the child may receive;
- (2) Review the child's program options for the period from the date of eligibility for Part B services through the remainder of the year; and
- (3) Establish and implement a transition plan, including, as appropriate, steps to exit the program.

(34 CFR 303.148) and 20 USC 1437(a)(9)(C)

2. PROCEDURES

a. Local lead agencies:

- (1) Address the transition component of the IFSP throughout the child and family's participation in Part C supports and services beginning with the child and family's initial IFSP and continuing through IFSP reviews and annual IFSPs.
- (2) Notify parents of children who may be eligible for Part B services of the local Part C system's intent to share the child's name, address, telephone number, and birth date with the appropriate local school division as the child reaches the age of eligibility for special education unless the parent disagrees. This notification is provided on the IFSP transition page and must specify the date on which the locality intends to send the information to the school division. The information is transmitted by the locality unless the parent indicates in writing on the IFSP transition page that they do not want the information transmitted.
- (3) Transmit, with parental permission, child-specific information (e.g. current IFSP, recent evaluation findings, and other pertinent records) to the appropriate school division in which the child resides no later than April 1 in a given year or at least 6 months prior to the child's third birthday.

b. The service coordinator is responsible for:

- (1) Ensuring that each child and family are offered individualized transition supports

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Deleted: <#>The Lead Agency ensures that children under Part C who are age eligible are referred to the local school division for eligibility determination under Part B by completion of the following: ¶

(1) As part of the initial and IFSP periodic review process (i.e., transition is discussed at each IFSP review), parents are informed in writing through the IFSP transition page that the locality intends to notify the school division in which the child resides of the child's name, address, telephone number, and birth date when the child reaches the age of eligibility for special education. This notice contains the date on which the locality intends to send the information to the school division. The information is transmitted by the locality unless the parent indicates in writing on the IFSP transition page that they do not want the information transmitted. ¶

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- and services;
- (2) Ensuring that individualized transition planning activities are documented on the child's IFSP;
 - (3) Ensuring the referral and timely transfer and exchange of records and other information for families who:
 - i) Enter into the early intervention system from hospitals, providers, local early intervention systems and/or out-of-state
 - ii) Exit the early intervention system to another early intervention system within Virginia, Part B, an early intervention system out-of-state and/or other community programs;
 - (4) Ensuring that families whose children are referred to Part C after April 1st and will reach the age of eligibility for special education at the beginning of the following school year are informed of services available through the public schools and that, with parental permission, child-specific information is shared with the LEA as soon as possible following referral to Part C.
 - (5) Obtaining parental permission through use of the Parental Prior Notice form to convene a conference between the sending Part C providers, the family, and the local educational agency that occurs at least 90 days, or up to 9 months, prior to the child's eligibility under Part B or the date on which the child is eligible for early childhood special education services under Part B of IDEA.
 - (6) Inviting appropriate individuals to participate in the 90-day transition planning conference, including local educational agency personnel.
 - (7) Ensuring that the family is included in any transition planning conference, that the family understands the purpose of the meeting, and that the family is supported in identifying the steps to be taken to support the transition process.
 - (8) Assisting the family in exploring alternative settings for:
 - (a) The child who is not eligible for Part B services and who continues with Part C supports and services until the third birthday;
 - (b) The child whose family chooses not to receive Part B services and who continues with Part C supports and services until the third birthday; or
 - (c) The child who is no longer eligible for Part C supports and services prior to the third birthday.

Deleted: <#>LICCs develop and implement policies and procedures (including mechanisms) to ensure that a service coordinator is assigned upon receipt of a referral of a child/family currently receiving early intervention services who is moving from one council area to another within Virginia or from another state.¶

<#>If a family moves from one local council area to another within Virginia, or to another state, with parent permission, the service coordinator is responsible for referring the family to the receiving council/state and providing evaluation and assessment information, IFSPs, and other pertinent information in order to ensure continuity of services. For children moving within Virginia, services identified on the current IFSP remain in effect until the receiving community can convene an IFSP team and conduct an IFSP meeting, if necessary.¶

<#>For children with a completed IFSP moving to Virginia from another state, the temporary service coordinator is responsible for convening a multidisciplinary/interdisciplinary/transdisciplinary evaluation team to determine if the child is eligible in Virginia. Eligibility determination from the existing IFSP record should be used, as appropriate.¶

<#>Upon referral to early intervention services, the temporary service coordinator is responsible for providing information to the child's family on Virginia's system of services for children with disabilities birth to age five and their families. This information must include the Virginia mandate for the provision of special education (Part B) services for children with disabilities who turn two prior to September 30 of a school year.¶

<#>The temporary service coordinator is responsible for ensuring that transition planning begins with the development of the initial IFSP.¶

<#>For children potentially eligible for Part B services, LICCs develop and implement policies and procedures (including mechanisms) for notifying parents of the local Part C system's intent to share with the appropriate local school division the name, address, telephone number, and birth date of those children who will reach the age of eligibility for Part B special education services and procedures for sharing such information unless the parent disagrees. In order to facilitate a smooth transition and continuity of services for each child and family, the service coordinator or other designated person is responsible ... [15]

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The service coordinator is responsible for scheduling a periodic review of the IFSP at least every six months. The periodic review may be carried out by an actual meeting or by other means that are acceptable to the parent(s) and other participants as long as all members have the opportunity to provide input about all contents of the IFSP.

The service coordinator is responsible for scheduling an annual IFSP meeting (at least by the anniversary date of the initial or previous annual IFSP meeting) to evaluate the IFSP, using results of written evaluations and ongoing assessment, and, as appropriate, to revise its provisions. Because the annual IFSP meeting incorporates a periodic review, *it is necessary to have only one separate periodic review each year (i.e., six months after the initial and subsequent annual IFSP reviews), unless conditions warrant otherwise.*

Note: Because the needs of infants and toddlers change so rapidly during the course of a year, certain evaluation procedures may need to be repeated before conducting the periodic reviews and annual evaluation meetings. (34 CFR 303.342 Note)

The service coordinator is responsible for ensuring that the IFSP team uses both information from the family regarding their priorities and preferences and any current evaluations and assessment information in determining which IFSP services and informal/formal supports and resources are needed.

The service coordinator is responsible for arranging IFSP meetings in settings that are comfortable and convenient for families and that facilitate a family's ability to participate. Possible setting options include, but are not limited to, a family's home, the home of a neighbor or of a family child care provider, child care centers, churches, family resource centers, and other community buildings where children and their families normally spend time.

The service coordinator is responsible for explaining the contents of the IFSP to the parent(s) and obtaining informed written consent from the parent(s) prior to the provision of early intervention services described in the IFSP.

Service providers are responsible for providing only those services for which parent consent is obtained.

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ensuring that families have multiple opportunities to make their wishes known on the selection of, and participation in, strategies and early intervention services (including frequency, intensity, location, method of delivery and dates of initiation) to meet IFSP outcomes.

The service coordinator is responsible for retaining a signed copy of the IFSP and for providing a copy to the family. Service providers may choose to have a copy of part of the IFSP if necessary and if permission is granted by the family.

The service coordinator is responsible for advising the family of the availability of advocacy services and of the dispute resolution procedures under Part C.

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Documentation exists that there is a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay, even though it is possible that no delay currently exists

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There are *obvious immediate needs that are identified even at the time of referral (e.g. a physician recommends that a child with cerebral palsy begin physical therapy as soon as possible);*

Parental consent is obtained;

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Other

POLICIES

In Virginia,

"Parent" means *a natural or adoptive parent of a child, a guardian, a person acting as parent (such as a grandparent or stepparent with whom the child lives, or a person who is legally responsible for the child's welfare;), or a surrogate parent who has been assigned in accordance with Reg. 303.406.* (34 CFR 303.19(a))

Unless State law prohibits a foster parent from acting as a parent, a State may allow a foster parent to act as a parent under Part C of the Act if:

The natural parents' authority to make the decisions required of parents under the Act has been extinguished under State law; and

The foster parent-

Has an ongoing, long-term parental relationship with the child;

Is willing to make the decisions required of parents under the Act;

Has no interest that would conflict with the interest of the child.

(34 CFR 303.19(b))

"Early intervention services" means services that:

Are designed to meet the developmental needs of each child eligible under this part and the needs of the family related to enhancing the child's development;

(34 CFR 303.12(a)(1))

Are selected in collaboration with the parents;

(34 CFR 303.12(a)(2))

Are provided:

Under public supervision;

(34 CFR 303.12(a)(3)(i))

By "qualified" personnel, as defined in 34 CFR 303.22;

(34 CFR 303.12(a)(3)(ii))

These personnel need not be limited to traditional occupational categories.

In conformity with an individualized family service plan; and

(34 CFR 303.12(a)(3)(iii))

At no cost, unless, subject to Reg. 303.520(b)(3), Federal or State law provides a system of payments by families, including a schedule of sliding fees.

(34 CFR 303.12(a)(3)(iv))

Meet the standards of Virginia, including the requirements of Part C.

(34 CFR 303.12(a)(4))

"Natural environments" means *settings that are natural or normal for the child's age peers who have no disability. To the maximum extent appropriate to the needs of the child, early intervention services must be provided in natural environments, including the home and settings in which children without disabilities participate.*

(34 CFR 303.12(b))

"Health services" means *services necessary to enable a child to benefit from other early intervention services under this part during the time the child is receiving the other early intervention services.*

(34 CFR 303.13)

The term includes:

Such services as clean intermittent catheterization, tracheostomy care, tube feeding, the changing of dressings or colostomy collection bags, and other health services; and (34 CFR 303.13(b)(1))

Consultation by physicians with other service providers concerning the special health care needs of eligible children that need to be addressed in the course of providing other early intervention services. (34 CFR 303.13(b)(2))

The term does not include the following:

Services that are surgical in nature (such as cleft palate surgery, surgery for club foot, or the shunting of hydrocephalus);

Services that are purely medical in nature (such as hospitalization for management of congenital heart ailments, or the prescribing of medicine or drugs for any purpose);

Devices necessary to control or treat a medical condition;

Medical-health services (such as immunizations and regular 'well-baby' care) that are routinely recommended for all children. (34 CFR 303.13(c))

NOTE: This definition of health services *distinguishes between the health services that are required under [Part C] and the medical-health services that are not required. The IFSP requirements in Part C provide that, to the extent appropriate, these other medical-health services are to be included in the IFSP, along with the funding sources to be used in paying for the services or the steps that will be taken to secure the services through public or private sources. Identifying these services in the IFSP does not impose an obligation to provide the services if they are otherwise not required to be provided under this part* (See 303.344(e), and Note 3). (34 CFR 303.13, Note)

Transportation is an early intervention service and includes the cost of travel (e.g., mileage, or travel by taxi, common carrier, or other means) and related costs (e.g., tolls and parking expenses) that are necessary to enable a child eligible under Part C and the child's family to receive early intervention services. (34 CFR 303.12(d)(15))

The Lead Agency ensures that *each agency or person who has a direct role in the provision of early intervention services is responsible for making a good faith effort to assist each eligible child in achieving the outcomes in the child's IFSP. However, Part C of the Act does not require that any agency or person be held accountable if an eligible child does not achieve the growth projected in the child's IFSP.* (34 CFR 303.346)

The Lead Agency ensures that *to the extent appropriate, service providers in each area of early intervention services are responsible for:* (34 CFR 303.12(c))

Consulting with parents, other service providers, and representatives of appropriate community agencies to ensure the effective provision of services in that area; (34 CFR 303.12(c)(1))

Training parents and others regarding the provision of those services; and (34 CFR 303.12(c)(2))

Participating in the multidisciplinary/interdisciplinary/transdisciplinary team's assessment of a child and child's family, and in the development of integrated goals and outcomes for the individualized family service plan. (34 CFR 303.12(c)(3))

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The Lead Agency ensures that services are coordinated across agencies and that service coordinators, including temporary service coordinators, are assigned and that policies and procedures related to service coordination are carried out.

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The Lead Agency ensures that service coordination is a *required function that must be carried out at public expense, and for which no fees may be charged to parents.*

(34 CFR 303.521(b)(3))

The Lead Agency ensures that families *retain the ultimate decision in determining whether they, their child, or other family members will accept or decline* any or all early intervention services, including service coordination, except where court ordered.

(34 CFR 344 Note 2)

NOTE: In Virginia, courts are authorized to order parents and their children to participate in certain services as a result of abuse and neglect. Depending on the circumstances, these court-ordered services may include some Part C early intervention services.

The Lead Agency ensures that *each child/family eligible under this part is provided with one service coordinator who is responsible for:*

Coordinating all services across agency lines; and

Serving as the single point of contact in helping parent(s) to obtain the services and assistance they need.

(34 CFR 303.23(a)(2))

The Lead Agency ensures that service coordinators are qualified employees including either professionals or paraprofessionals who have *demonstrated knowledge and understanding about:*

Infants and toddlers who are eligible under this part;

Part C of the Act and the regulations in this part;

The nature and scope of services available under the early intervention program, the system of payments for services in Virginia, and other pertinent information; and

(34 CFR 303.23(d))

family-centered practice, team functioning, and interagency collaboration

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The Lead Agency ensures that *service coordination is an active, ongoing process that involves:*

Assisting parents of eligible children in gaining access to the early intervention services and other services identified in the individualized family service plan;

Coordinating the provision of early intervention services and other services (such as medical services for other than diagnostic and evaluation purposes) that the child needs or is being provided;

Facilitating the timely delivery of available services; and

Continuously seeking the appropriate services and situations necessary to benefit the development of each child being served for the duration of the child's eligibility.

(34 CFR 303.23(a)(3))

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NOTE: The procedures for designating a service coordinator at the time of the initial

IFSP meeting do not preclude the temporary service coordinator from continuing as service coordinator.

The IFSP team acknowledges the role of the service coordinator. The IFSP team ensures that the family knows who their service coordinator is, and knows the procedures to change their service coordinator. The family may choose the level to which they participate in service coordination activities and may change their level of involvement in service coordination as they desire during their participation in the Part C system

NOTE: In order to ensure that the family has an opportunity to make an informed decision regarding their level of participation in service coordination activities, the family is involved in at least one meeting (e.g. an individual meeting with their service coordinator, or an IFSP or other team meeting which includes discussion of service coordination activities) prior to being asked their desired level of participation in service coordination activities.

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LICCs develop written procedures outlining the process a family can follow to request a change in service coordinators.

The Lead Agency ensures the provision of training to enhance the knowledge, skills, and abilities of service coordinators.

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a component related to transition. This transition component is included in the IFSP throughout the child's and family's participation in Part C services beginning with the child's and family's initial IFSP. Requirements for the transition component of the IFSP include

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The Lead Agency ensures that children under Part C who are age eligible are referred to the local school division for eligibility determination under Part B by completion of the following:

(1) As part of the initial and IFSP periodic review process (i.e., transition is discussed at each IFSP review), parents are informed in writing through the IFSP transition page that the locality intends to notify the school division in which the child resides of the child's name, address, telephone number, and birth date when the child reaches the age of eligibility for special education. This notice contains the date on which the locality intends to send the information to the school division. The information is transmitted by the locality unless the parent indicates in writing on the IFSP transition page that they do not want the information transmitted.

(2) With parent permission, the locality transmits to the appropriate school division in which the child resides child-specific information (e.g. current IFSP, recent evaluation findings, and other pertinent records) no later than April 1 of a given year (in accordance with the state level memorandum of agreement with the State Education Agency (SEA)).

NOTE: In accordance with the Regulations Governing Special Education Programs for Children with Disabilities in Virginia, referrals for children who may be eligible for preschool (Part B) programs may be made at any time during the calendar year. Therefore, parents of children who are referred to the Part C early intervention system after the April 1st date and who will reach the age of eligibility for special

education services the following school year, are informed of the availability of public school services as well as Part C services until the child enters school or reaches the age of three. Families are also informed of the timelines required for the public school to determine eligibility and initiate placement. In order to ensure that children found eligible for special education can begin school as close to the beginning of the school year as possible, steps 1 and 2 above are completed as soon as possible.

For families choosing to delay transition to Part B, local LEAs and/or IEUs are provided six-months advance notice of the date the child will be entering school services, such date not to occur after the child's third birthday.

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With parental consent, the transmission of information about the child to the local education agency, to ensure continuity of services, including evaluation and assessment information required in § 303.322, and copies of IFSPs that have been developed and implemented in accordance with §§ 303.340 - 303.346 is completed.

(34 CFR 303.344(h)(2)(iii))

The Lead Agency ensures that parents are provided information regarding possible future placements, transition service options and other matters related to the child's transition. This information is provided in the parents' native language. Activities of the service coordinator include facilitating the development of a transition plan to preschool services, other services, or to no further services, as appropriate.

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LICCs develop and implement policies and procedures (including mechanisms) that are consistent with state-level policies and procedures for transition between the sending and receiving program as the child enters or exits the early intervention system.

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LICCs develop and implement policies and procedures (including mechanisms) to ensure that a service coordinator is assigned upon receipt of a referral of a child/family currently receiving early intervention services who is moving from one council area to another within Virginia or from another state.

If a family moves from one local council area to another within Virginia, or to another state, with parent permission, the service coordinator is responsible for referring the family to the receiving council/state and providing evaluation and assessment information, IFSPs, and other pertinent information in order to ensure continuity of services. For children moving within Virginia, services identified on the current IFSP remain in effect until the receiving community can convene an IFSP team and conduct an IFSP meeting, if necessary.

For children with a completed IFSP moving to Virginia from another state, the temporary service coordinator is responsible for convening a multidisciplinary/interdisciplinary/transdisciplinary evaluation team to determine if the child is eligible in Virginia.

Eligibility determination from the existing IFSP record should be used, as appropriate.

Upon referral to early intervention services, the temporary service coordinator is responsible for providing information to the child's family on Virginia's system of services for children with disabilities birth to age five and their families. This information must include the Virginia mandate for the provision of special education (Part B) services for children with disabilities who turn two prior to September 30 of a school year.

The temporary service coordinator is responsible for ensuring that transition planning begins with the development of the initial IFSP.

For children potentially eligible for Part B services, LICCs develop and implement policies and procedures (including mechanisms) for notifying parents of the local Part C system's intent to share with the appropriate local school division the name, address, telephone number, and birth date of those children who will reach the age of eligibility for Part B special education services and procedures for sharing such information unless the parent disagrees. In order to facilitate a smooth transition and continuity of services for each child and family, the service coordinator or other designated person is responsible for transmitting, with parental permission, child-specific information (e.g. current IFSP, recent evaluation findings, and other pertinent records) to the appropriate school division in which the child resides no later than April 1 in a given year or at least 6 months prior to the child's third birthday. For children who are referred to Part C after the April 1st deadline and who will reach the age of eligibility for special education at the beginning of the following school year, the service coordinator or other designated person is responsible for informing the family of services available through the public schools and sharing identifying information, and with parental permission, child-specific information to the LEA as soon as possible following referral to Part C.

The service coordinator is responsible for obtaining parental permission through use of the written prior notice and consent forms to convene a conference between the sending Part C providers, the family, and the LEA that occurs at least 90 days prior to the child's eligibility under Part B (age 2 on or before September 30) or to the first day of the school year, whichever date comes first.

LICCs are responsible through interagency agreements and local policies and procedures for identifying who will be responsible for carrying out transition conferences.

The service coordinator is responsible for ensuring that the family is included in any transition planning conference and that the family is supported in identifying the steps to be taken to support the transition process.

NOTE: The required statewide IFSP form has a specific Transition Planning page that allows for specific transition plans and activities for each child and family. The degree of specificity in these transition steps depends on several factors that may include, but are not limited to (1) the child's age; (2) the family's stated desire or perceived readiness for transition information; and (3) the complexity of the upcoming transition in terms of necessity for change or accommodation in child and family routine. The service coordinator is responsible for providing to the parents written information of the timelines for the Part B special education eligibility process in sufficient time to ensure that parents will have time to give approval for release of records and the process be completed before the opening of the school year or whatever subsequent date chosen for Part B services to begin, up until the child's third birthday. Documentation of notification must be placed in the child's record. The transition page also documents the locality's intention to transmit directory information on a particular child and the parent's opportunity to disagree with that action.

The service coordinator ensures that during this transition conference:

The child's program options from the time of eligibility for Part B through the remainder of the school year are reviewed; and

A transition plan is established that identifies the:

Steps to complete transition;

Needs of families to participate in transition;

Responsibilities of LEAs and sending agencies in relation to the:

Exchange and review of records, evaluation reports and other information;
 Determination and provision of additional evaluations needed to determine
 eligibility;

Sharing of information with the family at each step of the transition process;
 Support of the family as needed throughout transition; and

Changes in the new environment to ease the child's and family's transition.

The child who is age two, on or before September 30, is eligible to continue to receive appropriate early intervention services until the child's third birthday, or until the child is determined not to be in need of early intervention services, if any of the following situations apply:

The child is eligible for Part B services, but the parents do not consent to placement under Part B, and choose to delay transition to a future time prior to the child's third birthday;

The child is age-eligible for Part B services, but the parents do not consent to an evaluation to determine eligibility for Part B services; or

The child is found not eligible for Part B services.

The service coordinator or other designated person is responsible for planning transition with the family. The service coordinator assists the family in the investigation of a range of alternative placements, for either;

The child who is not eligible for Part B services and who continues with Part C services until the third birthday; or for

the child who is no longer eligible for Part C services prior to the third birthday.

Alternative placements to consider include;

Head Start;

Integrated nursery school; or

Other early education or family support programs

In the case of a child who may not be eligible for such preschool services, the service coordinator, with parental consent, makes reasonable efforts to convene a conference among the service coordinator, the family, and providers of other appropriate services for children who are not eligible for preschool services under Part B, to discuss the appropriate services that the child may receive.

For children who are age-eligible for transition because they are two on or before September 30, but whose families choose to delay transition until later in the school year, the service coordinator or other designated person is responsible for using the written prior notice and consent forms to initiate a transition planning conference to identify the appropriate activities to ensure a smooth and timely transition.

The service coordinator in conjunction with the sending program is responsible for ensuring that each child and family are offered individualized transition services. With the consent of the parent(s), such transition services can include, but are not limited to:

Referral and timely transfer and exchange of records and other information;

Preparation of the child for the new environment;

Transition information, training, and support for the family; and

Changes in the new environment to ease the child's or family's transition.

With parental consent, the service coordinator is responsible for facilitating inclusion of representatives of the receiving program as specified in local interagency agreements and policies and procedures on the child's IFSP team, thus forming an expanded IFSP team, prior to the transitioning from local participating agencies to those services offered by the local education agency or other agencies.

The expanded IFSP team is responsible for ensuring smooth and timely transitions for individual children and families.

LICCs develop and implement policies and procedures (including mechanisms) to ensure that documentation exists specifying that parents have been notified of all their rights related to transition, including the process and timelines necessary for referral to the Part B system.

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